

Autism Valued Incorporated

FORM for APPOINTMENT OF PROXY

I,

.....

..... (name)

of

.....

.....

.....

..... (address)

State Postcode

.....

being a financial member of **Autism Valued Incorporated** for at least 21 days before the Annual General Meeting. (Last day for applying for membership is Monday, 26 October 2026.)

- ☐ Appoint the Chairperson as my proxy to vote for me on my behalf at the Autism Valued Annual General Meeting to be held on Monday 16 November 2026 via Zoom.

- Or -

- ☐ Appoint
.....
(name of proxy holder)

of

.....

.....

(address of proxy holder)

being a member of Autism Valued, as my proxy to vote for me on my behalf at the Autism Valued Annual General Meeting to be held on Monday 16 November 2026 via Zoom.

My proxy is authorised to vote:

- ☐ In favour of/ against the following resolutions /agenda items and to vote in respect of any resolutions on my behalf:

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This Appointment of Proxy form must be received by the Secretary (secretary@autismvalued.org.au) no later than 24 hours before the Annual General Meeting. 24 hours before the meeting is 7:30pm, Sunday 15 November 2026.

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Signed

Date / /2026